

SFY 2013 Budget Request Public Hearing

December 19, 2011



Mission

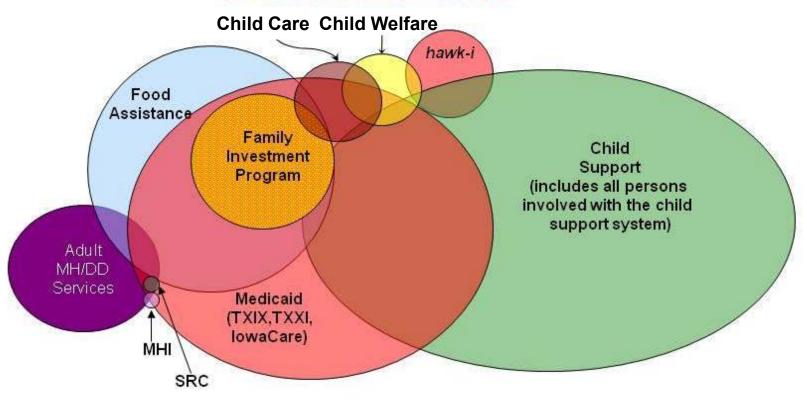
The Iowa Department of Human Services helps Iowans achieve healthy, safe, stable and self-sufficient lives through the programs and services we provide.

Vision

The Iowa Department of Human Services makes a positive difference in the lives of Iowans we serve.

Total DHS Clients Served

(928,566 unduplicated)



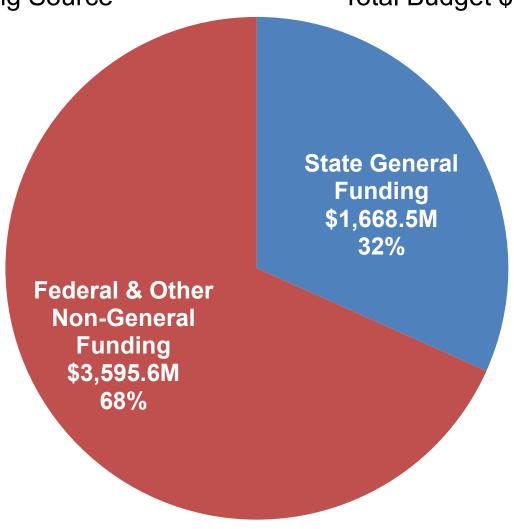
Data as of June 2011; report shows lowans served by DHS in a single month; Some individuals may be in more than one program.

Iowa Population 3,046,355 (2010 Census)

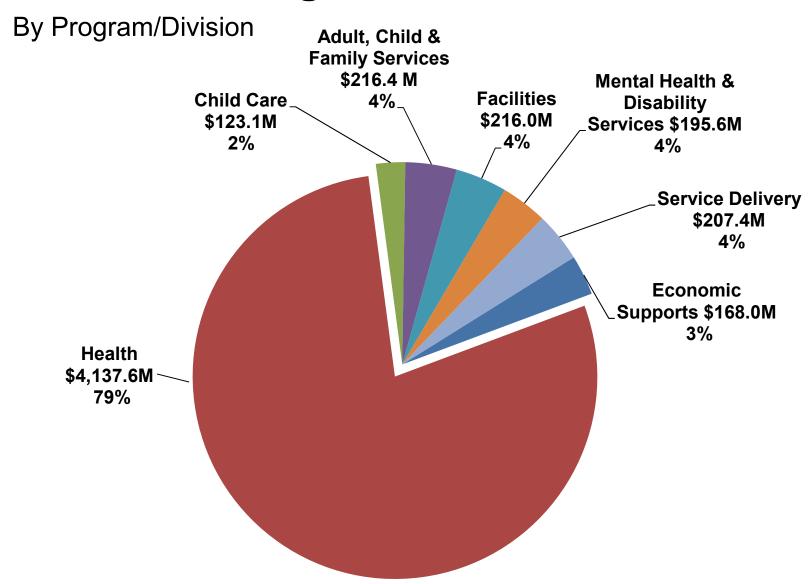
% of Population Served: 30%

SFY 2013 Budget Submission



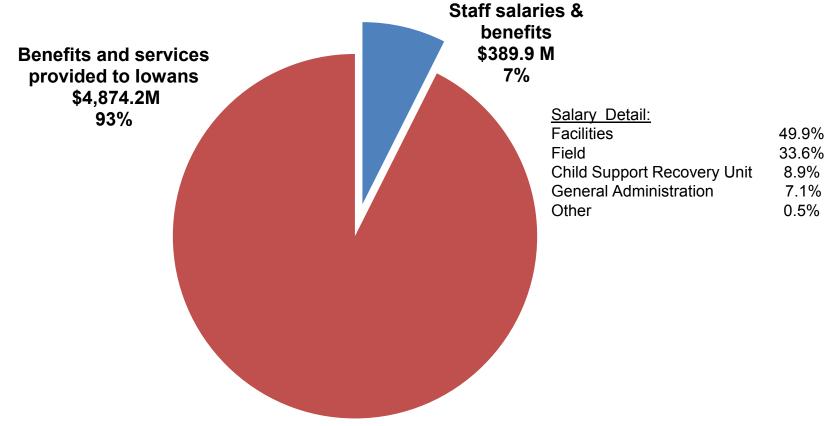


SFY 2013 Budget Submission



SFY 2013 Budget Submission

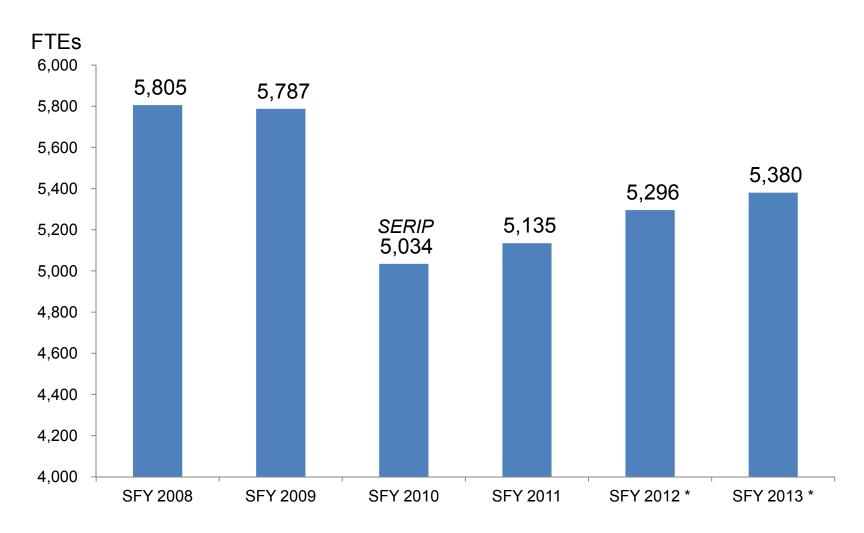
By Programs/Services & Service Delivery



DHS also

- manages & distributes \$621M in Federal food assistance benefits
- collects and distributes \$330M in child support payments

Average FTEs by State Fiscal Year



^{*} Increase driven by caseload growth.



SFY 2013 Budget Request

Increase over SFY 2012 appropriation = \$128,437,167 % Increase over SFY 2012 appropriation = 8.3%

Medicaid increase over SFY 2012 appropriation = \$95,040,207 % Increase over SFY 2012 appropriation = 11%



Increase by Program or Division

Requested increase in General Fund Appropriation

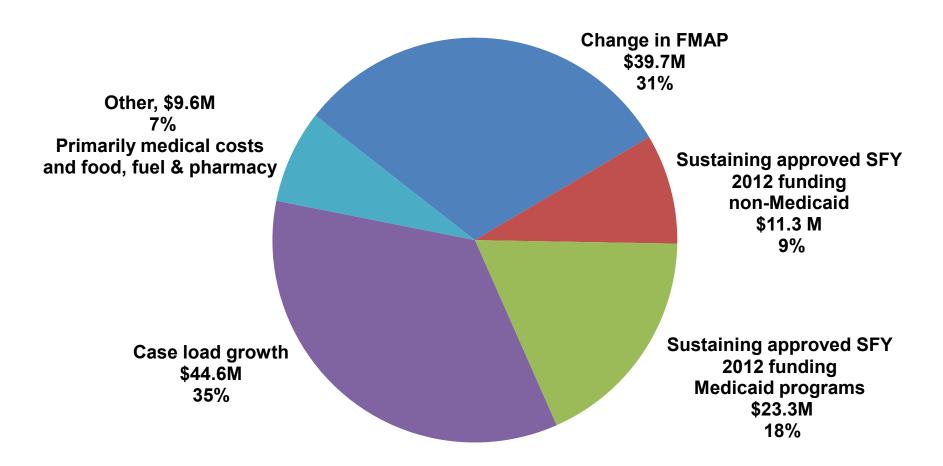
SFY 2013 increase over SFY 2012

Health	\$105,074,507	11.0%
Service Delivery	10,496,831	12.7%
Assistance	10,112,697	4.3%
Facilities	2,439,085	3.0%
Mental Health & Disability Services	314,047	0.1%
Total	\$128,437,167	8.3%

Major categories of increases

SFY 2013 increase over SFY 2012

Total = \$128.4M

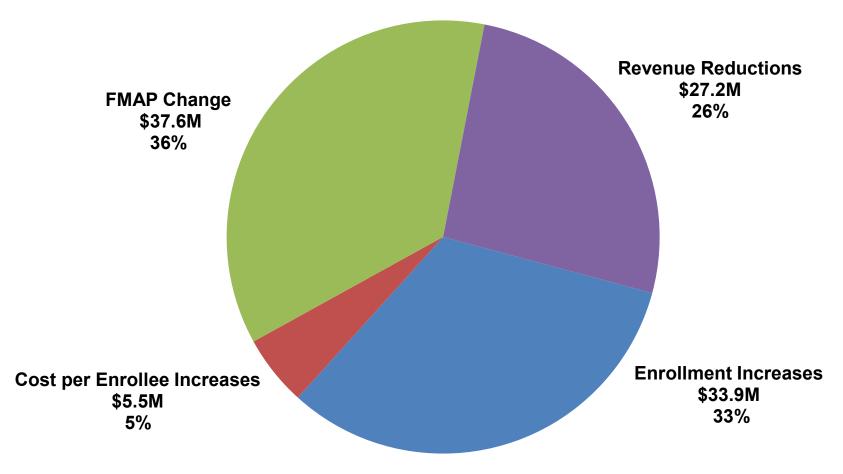


Medicaid Programs

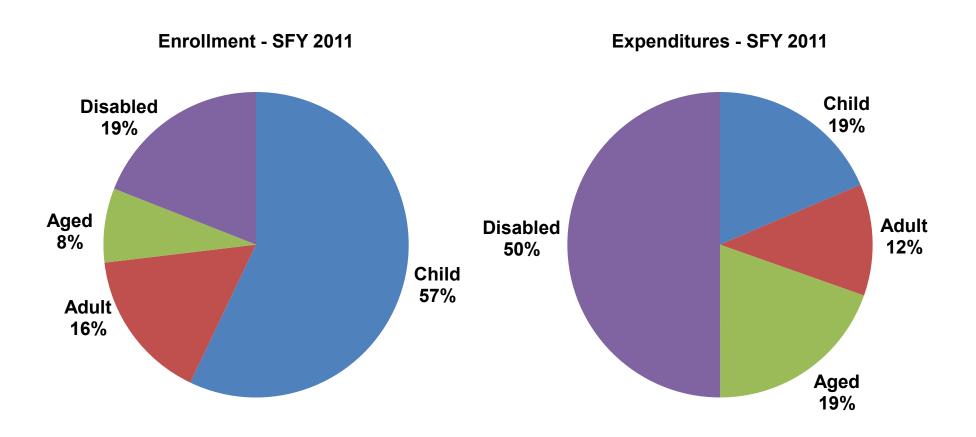
Sources of increase

Medicaid = \$95.0M

Medicaid children's programs = \$9.2M



Medicaid Enrollment and Expenditures





Child Care Programs

In SFY 11

- 23,000 children were served on a monthly basis
- Parents of 90% of children receiving assistance were employed which is a 3% increase over SFY 10
- 6,300 regulated child care providers and 4,300 non registered providers delivered services
- 90% of all billings were submitted electronically; of those submitted correctly, payment was issued in 10 business days

Need over SFY 2012 is \$10,851,513

Maintain approved level of funding for FY 12, cover FY 12 shortfall, caseload growth, shifts in federal funding



Adoption Services

- DHS finalized 850 adoptions in SFY 2011
- An individualized adoption subsidy based on the unique needs of the child are provided to the adoptive family.
- As of June 30, 2011, 8,586 children were receiving adoption subsidy.

Need over SFY 2012 is \$3,550,252

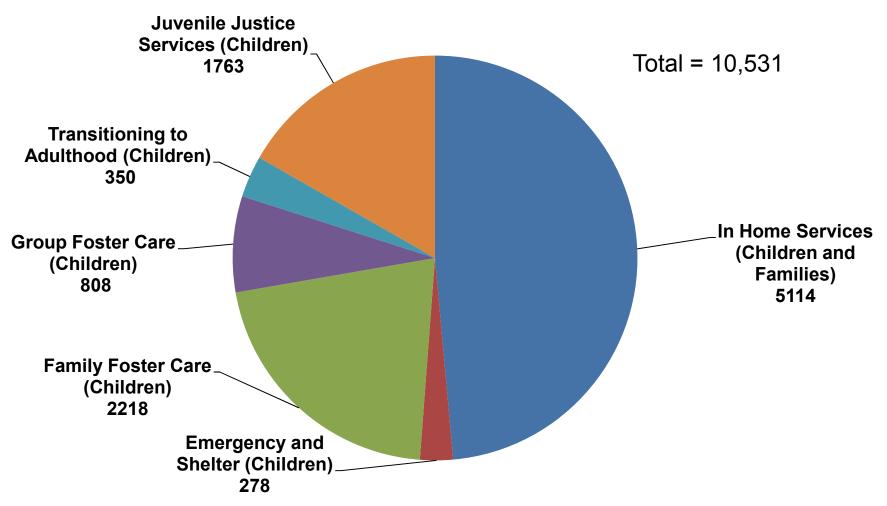
Maintain approved level of funding for FY 12, cover FY 12 shortfall, caseload growth, changes in federal funding



Child Welfare and Family Services (CFS)

- Child and Family Services include services provided to children who:
 - o are at -risk of abuse or neglect
 - have been adjudicated a Child in Need of Assistance
 - o are at risk of becoming a delinquent
 - have been adjudicated delinquent
 - o are transitioning from the foster care system into adulthood
- SFY 2011, 11,961 children were confirmed or found to be the victims of child abuse or neglect. Over 80% were victims of denial of critical care or neglect and over 50% are age 5 or younger.
- Annually, over 20,000 new youth are referred to Juvenile Court Services (JCS) each year and court petitions occur in approximately 4,753 of the cases.

SFY 11: Average Monthly Number of Children/Families receiving Child Welfare and Juvenile Justice Services





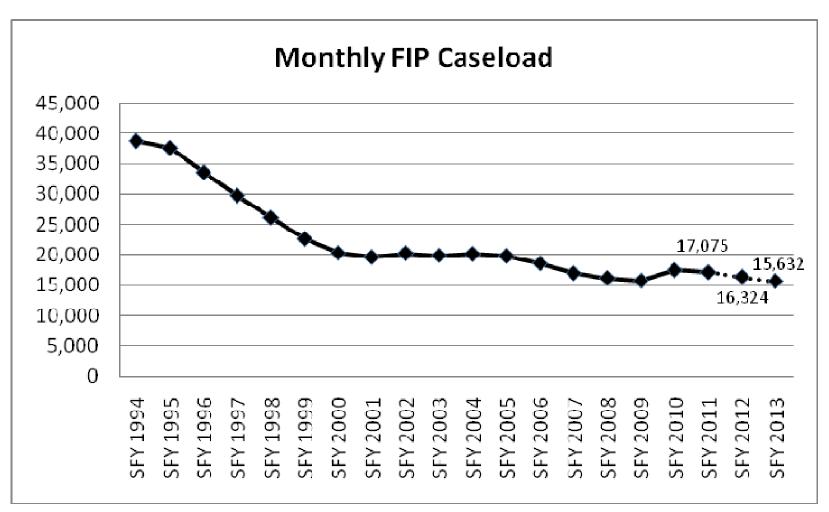
Family Investment Program (FIP)

- 11.8% of Iowa's population live in households with income below the federal poverty level (FPL)
 - < \$10,830 annually for a single adult
 - < \$18,310 annually for a family of three
- In SFY 11
 - 17,075 families received an average FIP grant of \$338 per month
 - o 77% were single parent families
 - 6% were two parent families
 - 17% were children living with caretaker relatives
- The average FIP family is headed by a single Caucasian mother between the age of 20-29 and has two children under the age of six.
- The average time spent receiving FIP is 21.11 months; the maximum time allowed is 60 months.

There is no additional need in SFY 2013 (over SFY 2012).

FIP monthly caseload

FIP caseload has decreased dramatically over the past 15 years.



Facilities – Operational beds per SFY 2013 Request

Mental Health Institutes

Program	Cherokee	Clarinda	Independence	Mount Pleasant	Total Beds
Adult Psychiatric	24	15	40	9	88
Child & Adolescent	12		20		32
Geropsychiatric		20			20
Substance Abuse				50	50
Dual Diagnosis				19	19
PMIC			15		15
Total Beds	36	35	75	78	224

Juvenile Facilities

	Beds
Eldora State Training School	130
Iowa Juvenile Home at Toledo	57
Total Beds	187

State Resource Centers

	Total Beds
Glenwood	255
Woodard	170
Total Beds	425

Civil Commitment Unit for Sexual Offenders (CCUSO)

	Total Beds
CCUSO	96



Field Operations

The Department's front line staff provide

- Child and Adult Protection
- Child Welfare case management
- Eligibility for FIP, Food Stamp, Child Care, and Medicaid Services.

Field Operations includes 1688 employees

- 5 geographic Service Areas with 1455 staff in 42 full time offices.
- 1 centralized service unit with 233 staff in 4 locations with statewide responsibility for:
 - Receipt of all reports of child and dependent adult abuse
 - Managing child care eligibility, payment and licensure
 - Managing Medicaid eligibility for persons in nursing homes
 - Responding to client calls related to financial assistance changes.



In FY 12 at any point of time, on a monthly basis

Child/Adult Abuse staff

- 4,700 calls reporting child and dependent adult abuse will be handled by 29 staff.
- Over 12 new abuse assessments will be initiated by 1 of 180 staff.

Child Welfare staff

 27 children/families will receive child welfare case management from 1 of 388 staff.

Income Maintenance staff

- 732 individuals/families will have their eligibility for economic assistance programs managed by 1 of 591 staff.
- 3,600 child care applications and 44,000 payments will be processed by 52 staff.



Field

- The number of social work staff directly affects child and adult safety.
- The number of income maintenance staff directly affects the timely and accurate determination of initial and ongoing eligibility for benefits and service.
- The number of all field staff—supervisors, support and workers—directly impacts compliance with state and federal requirements.

Need over SFY 2012 is \$9,212,994

Maintain approved level of funding for FY 12, maintain current caseload levels, caseload growth, increase program integrity



Child Support Recovery Unit

CSRU serves

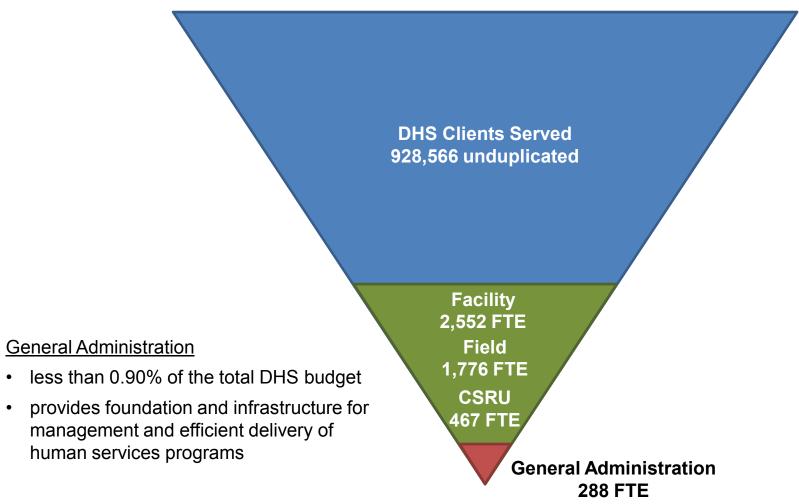
- Persons who currently or formerly received FIP
- Persons who currently or formerly received Medical Assistance
- Persons who apply for services

SFY 11, CSRU

- Served 651,042 parents and children on 184,955 cases
- Collected \$334.3M
- Collected \$10.1M that reduced the need for General Fund in FIP
- Sent 130,966 income withholding notices to employers for income withholding
- \$585,532 total child support collected per FTE

The number of all field staff – supervisors, support and workers – directly impacts ability to meet state and federal performance requirements

DHS Fulltime Employees





IT Infrastructure

Efficiency, accuracy and program integrity are supported through technology

Examples include:

- Electronic case file
- KinderTrack (Child Care Eligibility and Payment System)
- Iowa Integrated Eligibility Project
- Medicaid Management Information System
- Migration to DAS consolidation



MHDS Redesign

Redesign followed the plans in SF 525 that entailed

- 7 Workgroups
- Over 100+ persons on the Workgroups
- Significant consumer input
 - Over 900 attended public meetings
 - Over 1,600 responded to the consumer survey

Based on this work there is a need to address.

- <u>Structure</u> to establish more efficient management, clear cut authority, and improved accountability
- <u>Services</u> to enhance core services based on best practice and Olmstead principles
- <u>Financing</u> to simplify financial transactions, preserve non-Medicaid services, establish clear accountability, and to achieve maximum results



MHDS Redesign

Regional management was recommended for several reasons:

- Achieves economies of scale, reduces duplication of administration/costs, reduces inefficiencies to better use scarce resources
- Gives rural counties the opportunity to draw on capacities of urban counties
- Assures consistent, equitable, simplified access to a full array of core services
- Provides a clear locus of accountability and responsibility.



MHDS Redesign

The Department proposes

- If funding is available in FY 2013, the State:
 - Assumes the full cost of the non-federal share of Medicaid;
 - o Begins implementing initial phases of Redesign in FY 2013; and
 - Adopts the Federal Balancing Initiative.
- FY 2013 Impact
 - Estimated cost \$42M.
 - Preserves Medicaid and non-Medicaid services primarily for persons with mental illness.
- The state and regional structure be operational by July 2013
- Begin phasing in critical core services in FY 2014.



... making a positive difference in the lives of lowans